
Re: Medicaid managed care

1 message

McSwane, David <dmcswane@dallasnews.com>
To: John Wittman <John.Wittman@gov.texas.gov>
Cc: Andrew Chavez <achavez@dallasnews.com>

Fri, Nov 30, 2018 at 2:33 PM

John,

Ok, declined to comment it is. The story runs next week.

Dave

The Dallas Morning News
dallasnews.com

J. David McSwane
Investigative Reporter
512-370-3802
@davidmcswane

On Fri, Nov 30, 2018 at 2:30 PM John Wittman <John.Wittman@gov.texas.gov> wrote:

Dave,

Understood. I appreciate you checking.

Talk soon,

John

From: J. David McSwane <dmcswane@dallasnews.com>
Sent: Friday, November 30, 2018 1:44 PM
To: John Wittman <John.Wittman@gov.texas.gov>
Cc: Andrew Chavez <achavez@dallasnews.com>
Subject: Re: Medicaid managed care

John,

Thanks for promising to keep me in the loop. But I also want to be clear that we are asking for comment.

The story I reached out to you about is a good opportunity for the governor to lay out improvements to managed care, should he wish to. It would be placed near the top of the story.

As it stands now, we will have to publish that we ran these by you in detail but didn't receive comment, and that the governor really hasn't addressed egregious problems which are well documented. Let me know if you'd like to get in front of the story. Really, this story is about fixes.

Dave

Sent from my phone.

On Nov 30, 2018, at 1:17 PM, John Wittman <John.Wittman@gov.texas.gov> wrote:

Dave,

Thanks for reaching out on this and thanks for the welcome back to the Governor's office. I'll be sure to keep you in the loop on anything we might have in the future.

Looking forward to working with you this session.

John

From: McSwane, David <dmcswane@dallasnews.com>

Sent: Tuesday, November 27, 2018 12:28 PM

To: John Wittman <John.Wittman@gov.texas.gov>

Cc: Andrew Chavez <achavez@dallasnews.com>

Subject: Medicaid managed care

Hey John,

Welcome back to the governor's office. I'm dropping you a line because we're working on a story, a wrap-up really, about Medicaid managed care. As you probably know we've had a running series this year that detailed myriad problems with this system. [The whole story can be found here.](#)

In this final piece, we're exploring possible reforms or fixes that both Gov. Abbott and lawmakers could pursue. We interviewed more than a dozen health care, policy, law and Medicaid experts across the country to compare Texas with best practices and identify improvements.

Since HHSC is an executive agency, most of these fixes could be pursued at Abbott's will without legislative reform. A few require legislative fixes. So far, I haven't seen the governor acknowledge there are problems with managed care, and I certainly haven't seen him offer any solutions. Is there anything Abbott's administration intends to do? We'd love to include any changes his administration is pursuing.

For context, here are some of the changes that our experts said ought to be explored:

- Shifting to an Administrative Services Only arrangement with MCOs. This would mean companies are paid a flat fee for handling claims or care coordination. The financial risk, then, would shift back to the state. Experts say this would address the perverse incentive companies have to deny medically necessary care.
- State records show care coordination - a central promise of managed care - isn't reaching most enrollees. Experts recommended hiring doctors groups to handle that aspect, instead of companies. Does the governor have any ideas?
- Experts and a few critical lawmakers, including Rep. Sarah Davis, say the liquidated damages process needs to be more transparent and fines should be assessed according to the contract (instead of being quietly reduced by HHSC leadership). Does the governor have anything to say to that?
- There's tons of evidence that Medicaid managed care networks are inadequate. HHSC has given a pass to these companies for years. Is the governor going to order any sort of crackdown on network adequacy requirements?
- The state's fair hearing system heavily favors companies, and experts contend that it's not transparent enough. [Those problems are detailed here](#). Does Abbott want to change anything with this system?
- Foster children are having a tough time with Superior HealthPlan whose chronic denials of medically necessary care were detailed throughout the series. Yet, HHSC, under Abbott, extended the company's contract in August without any bidding. Child advocates say foster children should have the option to work with at least one other managed care company, as is required in other programs. That competition, they say, would force Superior to do a better job. Is that something the governor has an opinion on?
- Tweaks to MCO medical necessity guidelines made it easier to deny care or create additional hurdles, as was the case with D'ashon Morris. While the state sets broad guidelines on what care should be covered (TMPPM), 20 different companies have 20 different sets of interpretations and rules that doctors, patients and state appeals officers struggle to navigate. Texas should throw this system out the window, and create one definitive and clear set of rules that everyone must follow, our experts said. Any comment on that?

I'm of course happy to talk by phone. It's just a lot to go over, and I want you that have every opportunity to chime in. My cell is [REDACTED]. My deadline for this is Friday at noon.

Dave

J. David McSwane

Investigative Reporter

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